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FEE TRANSMITTAL	Application
for FY 2003	Filing Date
Ffective 01/01/2003 Patent fees are subject to annual revision	First Named

Applicant claims small entity status. See 37 CFR 1.27

OTAL AMOUNT OF PAYMENT	(\$)	305.00
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spond to a collection of info	ormation unless it displays a valid	OMB control number
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Application Number		
Filing Date		
First Named Inventor	L. Pernille Olesen	
Examiner Name		
Art Unit	1661	
Attomay Dealest No.	POUL CENTO- APP	

METHOD OF PAYMI	METHOD OF PAYMENT (check all that apply)  FEE CALCULATION (continued)				FE				
✔ Check Credit card	Money Other None	3. A	DDITI	ONA	LFEE	S			
Deposit Account:	Order	<u>Large</u>	Entity	Small	Entity				
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The Commissioner is authorized	<del></del>	1053	130 2,520	1053 1812		Non-English sp		te reexamination	
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	.CULATION	1251	110	2251	55	Extension for re		st month	
1. BASIC FILING FEE	COLATION	1252	410	2252	205	Extension for r	eply within se	cond month	
Large Entity Small Entity		1253	930	2253	465	Extension for r	eply within thi	rd month	
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1002 330 2002 165 D	Pesign filing fee	1401	320	2401	160	Notice of Appe	al		
1003 520 2003 260 P	Plant filing fee 265.00	1402	320	2402	160	Filing a brief in	support of an	n appeal	
1004 750 2004 375 R	Reissue filing fee	1403	280	2403	140	Request for ora	al hearing		
1005 160 2005 80 P	rovisional filing fee	1451	1,510	1451	1,510	Petition to instit	tute a public u	ise proceeding	
SUB	STOTAL (1) (\$) 265.00	1452	110	2452	55	Petition to reviv	e - unavoidat	ble	
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Total Claims -20** =	tra Claims below Fee Paid	1502	470	2502		Design issue fe			
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Claims ————————————————————————————————————		1807	50	1807		Petitions to the			
Large Entity   Small Entity	-	1806	180	1806		Processing fee			
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	Claims in excess of 20	8021	40	802		Recording each patent assignment per property (times number of properties)			40.00
	ndependent claims in excess of 3	1809	750	2809	375	5 Filing a submission after final rejection (37 CFR 1.129(a))			
1203 280 2203 140 M	Multiple dependent claim, if not paid	1810	750	2810	375	For each additional invention to be			
1204 84 2204 42 *	** Reissue independent claims					examined (37 CFR 1.129(b))			
1205 18 2205 0	over original patent	1801 750 2801 375 Request for Continued Examination (RCE)							
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent 1802 900 1802 900 Request for expedited examination of a design application		mation							
SUBTOTAL (2) (\$) )		Other	fee (sp	ecify) _					
**or number previously paid, if greater; Fo Reissues, see above			iced by	Basic I	Filing F	ee Paid (	UBTOTAL	(3) (\$) 40.00	
SUBMITTED BY (Complete (if applicable)									
Name (Print/Type) Ken Rynears n Registration No. (Attorney/Agent) Telephone 541 245-8050									
Signature Date 29 March 20			4						

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